



DEPARTMENT OF VETERANS AFFAIRS
Medical Center
2360 East Pershing Boulevard
Cheyenne WY 82001

RECEIVED JUL - 6 2009

June 30, 2009

In Reply Refer To:

442/136

Mr. Lonnie Starke
Administrator
Western Nebraska Veterans Home
1102 West 42 Street
Scottsbluff, Nebraska 69361

Subject: Scottsbluff, Nebraska FY 2009 Survey Report

The VAMC – Cheyenne survey team conducted a (three-day) review of the Scottsbluff, Nebraska State Veterans Home on June 9-11, 2009. Enclosed is the following information: VA Form 10-3567b-2 – State Nursing Home Care; VA Form 10-3567c – State Domiciliary Care; VA Form 10-3567 – Life Safety Report; Domiciliary Care Life Safety Report; VA Form 10-0143 – Fiscal Audit Report. These documents are the FY 2009 annual survey report for nursing home and domiciliary care at Scottsbluff, Nebraska State Home.

The nursing home and domiciliary care have met all VA standards except standards 51.130 a. Documentation lacking and missing medication and treatment records, signatures not readable. Standard 51.130 b. The facility does not have 24 hour RN coverage. Standard 51.190 b. Hand washing was not done immediate after care, housekeeping cart left unattended in room. Whirlpool was not disinfected, only sanitized. Standard 51.200 c. Cart with chemicals left in hall unlocked by housekeeping. These standards were Provisionally Met. See Life and Safety Report for recommendations in this area. Please submit a corrected action plan by August 11, 2009. If you have questions, please contact Keri Harris, State Veterans Home Coordinator, at (307) 778-7368.


David M. Kilpatrick, MD
Medical Center Director

August 5, 2009

Ms. Keri Harris
Cheyenne VA Medical Center
2360 East Pershing Blvd.
Cheyenne, WY 82201

Re: Corrective Action Plan- Western Nebraska Veterans' Home (WNVH)
Inspection June 2009

Dear Ms. Harris:

The following is the corrective action taken with regards to the recommendations noted:

Standard 51.130 a – Documentation lacking and missing medication and treatment records, signatures not readable.

Staff were educated on 6/17 and 7/22 nursing staff meetings about missing signatures. Each shift ADON's and RN supervisors will audit the monthly forms weekly for at least a month to ensure staff is signing as expected. If compliance with documentation is noted by their shift, they will then go to twice monthly, once monthly and then random to assure appropriate documentation.

Staff were educated on 6/17 and 7/22 nursing staff meetings about the need for legible signatures. A master signature sheet is currently being circulated with the criteria for at least 2 initials in their signature. When RN's check for documentation, they will also check for legibility and address staff as needed.

Standard 51.130 b – The facility does not have 24 hour RN coverage:

A part-time RN was hired 7/20 and a full-time one started 7/28 so WNVH now has 24 hour RN coverage.

Standard 51.190 b – Hand washing was not done immediately after care, housekeeping cart left unattended in room. Whirlpool was not disinfected, only sanitized:

A staff member removed their gloves after pericare and then continued repositioning the same member. Staff was educated on 6/17 to wash hands after every glove removal even if continuing care with same member. ADON's and RN supervisors will continue random audits. The facility will work on having hand sanitizer more accessible when ordered locks have been installed on the supply rooms.

New locking housekeeping carts have been purchased and staff has been instructed to park housekeeping carts outside member's room. Staff has been trained and educated instructing all chemicals must be kept under lock. Supervisors will continue to observe to ensure carts are locked.

WNVH exceeds Central Solutions instructions in sanitization and disinfection. In addition a phone call from Butch Keiser confirmed that sanitization is acceptable when member's skin is intact and disinfection process should always be done when the member has a skin infection. Dr. Phillip Smith, Infection Control physician and author, stated that it is acceptable to follow the manufacturer's recommendation. Mary Arends, RN infection control nurse confirmed that a facility should be able to follow the manufacturer's directions as they have established data to prove the bactericidal effectiveness of the product. We have enclosed literature from the disinfectant and bathing tub, as well as our policy.

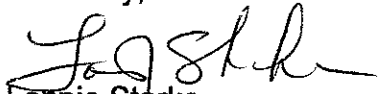
Standard 51.200 c – Cart with chemicals left in hall unlocked by housekeeping:

New locking housekeeping carts have been purchased to prevent further incidents. Staff have been trained and educated to keep all chemicals under lock. Supervisors will continue to observe to ensure chemicals are kept under lock.

Should you need additional information, please do not hesitate to call.

Thank you.

Sincerely,



Lonnie Starke
Administrator

Attachments

C: John Hilgert